

Department of Homeland Security
Federal Law Enforcement Training Center
Cheltenham State and Local Law Enforcement Training
Training America's Finest

STATE AND LOCAL TRAINING REGISTRATION REQUEST

PROGRAM TITLE (required)

DATES OF TRAINING (required)

LOCATION OF TRAINING (required)

NAME (as you want it to appear on certificate)

SOCIAL SECURITY NUMBER

RANK/TITLE

SEX

☐ M

☐ F

DEPARTMENT/AGENCY NAME

AGENCY TYPE

☐

Federal

☐

State

☐

Local

☐

Other

DEPARTMENT ADDRESS

Street: _____

P.O. Box: _____

City: _____

State: _____ Zip Code: _____

OFFICE TELEPHONE NUMBER

FAX TELEPHONE NUMBER

E-MAIL

RETURN THIS FORM TO:

Federal Law Enforcement Training Center
9000 Commo Road
Cheltenham, Maryland 20623-5000
Phone: (301) 868-5830
Fax: (301) 877-8521

IMPORTANT INFORMATION:

Confirmation: A confirmation letter with details of the training will be provided upon acceptance into the program. This form is used to REQUEST registration. Before making travel arrangements, please ensure you are actually registered in the program. Please do not remit payment, if applicable. Your agency will be billed upon program completion for any program costs.

Private Organization: Applicants from private organizations must be sponsored by a federal agency or a state or local law enforcement agency.

PRIVACY ACT INFORMATION:

Authority: 42 U.S.C. 4742; 5 U.S.C. 552; and F.R. 16586, March 12, 1981.
Purpose: Obtaining information from individuals applying to the FLETC Cheltenham training program for student registration and program administration purposes.
Uses: Disclosure upon request to the individual, the individual's parent agency, to any other individual or agency at the request of the individual, to the student locator, mailroom, registration office, training and research officials, and government officials on a need-to-know basis.

Effect of Nondisclosure: Supplying the information is voluntary and not required by law. Disclosure of your social security number, which is solicited under authority of E.O. 9397, is voluntary, and no right, benefit or privilege by law will be denied as a result of refusal to disclose it. Not providing all or any part of the information may result in the applicant not being registered for the requested program.

Financial Reimbursement (This block **MUST** be completed for tuition-based programs):

The _____ agrees to reimburse the FLETC for training services provided. The FLETC will bill for the actual cost of training during the month after the program is completed. Please provide the following billing information:

Dept./Agency Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Federal ID Number: _____

Contact Person: _____

Telephone: _____

Fax: _____

Authorized Signature: _____
(Procurement or Financial Manager)

**FEDERAL LAW ENFORCEMENT TRAINING CENTER
CHELTENHAM, MARYLAND
TACTICAL TRAINING POLICY**

1. Live-fire weapons are prohibited from use in any training venue outside the Firearms Division Range Complex (Building 5) and the live fire shoot house. All weapons used in non-lethal training will be dedicated non-lethal weapons that cannot be used as live-fire weapons.
2. A dedicated safety officer will be assigned to physically inspect all weapons prior to the start of each exercise. The safety officer will control entry and egress of the assigned training area.
3. Live-fire weapons are not to be carried into the Tactical Village and the firearm simulator areas (Basement, Building 1A). Weapons will be secured in the weapon lockers provided at the entrances to those areas. Other areas may, from time-to-time, be temporarily declared as “firearms prohibited zones”, as required for safety involving special events/training.
4. Immediately react to, and follow the commands given by instructors. The command, “Out of role,” and/or a whistle, will stop all action in scenario-based training.
5. Participants will wear all safety equipment appropriate to the training activity.
6. The use of “flash-bangs” or other similar explosive devices are prohibited, except in the live fire shoot house.
7. The use of jam-spreaders, rams, or similar entry devices is prohibited, except in the live fire shoot house.
8. All training will be confined to the specific area(s) you are scheduled. Officers/Agents in training should not stray into adjacent training venues, or interfere with another agency’s training.
9. All training must be scheduled, in advance, with the FLETC scheduling office, (301) 877-8515 or (301) 877-8516. If your agency must cancel a scheduled training event, please call the same number at the earliest possible time.
10. All training accidents will be reported to the FLETC staff. Call 301-877-8400 in an emergency. Please report any inoperative, missing, or damaged property to the FLETC staff at the Cheltenham Scheduling Office.

**ACKNOWLEDGMENT, RELEASE AND HOLD HARMLESS AGREEMENT
FOR USE OF FEDERAL LAW ENFORCEMENT TRAINING CENTER
FACILITIES**

In order to use the training facilities at the Federal Law Enforcement Training Center (FLETC), Cheltenham, Maryland the AGENCY agrees and understands that, **IT VOLUNTARILY AND WILLINGLY ASSUMES THE RISK OF PERSONAL INJURY AND LOSS OF PROPERTY THAT MAY OCCUR AS A RESULT OF PARTICIPATING IN SUCH TRAINING.**

The AGENCY agrees to indemnify, defend and hold harmless the United States, the FLETC, their officers, agents, employees, affiliates, successors and assigns from and against any and all losses, liabilities, damages, claims, fines, causes of action deficiencies, costs and expenses (including reasonable attorneys' fees and other litigation expenses) based upon, arising out of or otherwise related to such training.

The AGENCY also agrees to release the United States and the FLETC from any and all liabilities, damages, claims, fines, causes of action, including but not limited to negligence, gross negligence, deficiencies, costs and expenses based upon, arising out of or otherwise related to the AGENCY'S participation in such training, including but not limited to the loss of any property the AGENCY may use or bring to the training.

AGREED TO: _____
Date

Printed Name & Title

Signature